UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| Attorney Docket No. | ` |
|------------------------|---|
| First Inventor | |
| Title | |
| Express Mail Label No. | |

| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 | | | | | | | | |
|--|---|--|--|--|--|--|--|--|--|
| 1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. Specification [Total Pages] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. Drawing(s) (35 U.S.C. 113) [Total Sheets] 5. Oath or Declaration [Total Sheets] Newly executed (original or copy) | Alexandria VA 22313-1450 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Other: | | | | | | | | |
| b. Copy from a prior application (37 CFR 1:63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Application Data Sheet. See 37 CFR 1.76 | | | | | | | | | |
| 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: | | | | | | | | | |
| Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner Art Unit: For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. | | | | | | | | | |
| 19. CORRESPOND | JENCE AUDRESS | | | | | | | | |
| Customer Number: | OR Correspondence address below | | | | | | | | |
| Name DAVIDM. SO IAK. Address 4805 MAPLE HILL DIZIVE | | | | | | | | | |
| | State OHIO Zip Code 44131 | | | | | | | | |
| , CEVELY TITLS | Tephone 216447-0720 Fax 216642 1417 | | | | | | | | |
| Name (Print/Type) DAW / 1/1 SulAk Registration No. (Attorney/Agent) | | | | | | | | | |
| Signature First M. Soluh | Date MAZ / 2004 | | | | | | | | |

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Comfidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/21 (05-03)
Approved for use through 04/30/2003. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid QMR control number. Application Number TRANSMITTAL Filing Date FORM First Named Inventor LAVID M. Sulat Art Unit (to be used for all correspondence after initial filing) **Examiner Name** Attorney Docket Number Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance communication Drawing(s) Fee Transmittal Form to Group Appeal Communication to Board 190.01 Fee Attached Licensing-related Papers of Appeals and Interferences Appeal Communication to Group Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Terminal Disclaimer Extension of Time Request Identify below): Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Remarks Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Individual name Signature Date CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Signature

Date

Mar 1. 2004

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o a collection of information unless it displays a valid OND.

| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 | | | | | Application or Docket Number | | | | | | |
|--|--|---|---------------|---|------------------------------|------|-----------------------|----------------------------|------|--------------------|------------------------|
| CLAIMS AS FILED PART I (Column 1) (Column 2) SMALL ENTITY | | | | | | | OR · | OTHER THAN SMALL ENTITY | | | |
| | FOR NUMBER FILED NUMBER EXTRA | | 1 | RATE | FEE | | RATE | FEE | | | |
| | BASIC FEE (37 CFR 1.16(a)) /0 -#385.00 | | | 1 | | s385 | OR | | s | | |
| TOT | TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = -18 | | 1 | x s = | | OR | x s = | | | | |
| INDE | NDEPENDENT CLAIMS | | | | x s = | | OR | x \$ = | | | |
| (37 CFR 1.16(b)) minus 3 = ' -/ | | | | | 1 | | | | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) | | | | | 1 1 | +s= | 30-00 | OR | +\$= | | |
| * If th | ne difference in c | olumn 1 is less tha | an zero, en | ter "0" in column | 2. | | TOTAL \$\frac{1}{2}\$ | 385.00 | OR | TOTAL | L |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | | |
| | | (Column 1) | | (Column 2) | (Column 3) | | SMALL E | NTITY | OR | OTHEF SMALL | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
|)ME | Total (37 CFR 1.16(c)) | * | Minus | ** | = | | x s = | | OR | x s= | |
| H N | independent (37 CFR 1.16(b)) | • | Minus | *** | = | | x s = | | OR | x s = | |
| AM | FIRST PRESENT | ATION OF MULTIPL | E DEPENDE | NT CLAIM (37 CF | R 1.16(d)) | ן ו | +s = | | OR | | |
| | | | | • | · // | , , | TOTAL | | | TOTAL | |
| | | | | | | | ADD'L FEE | | OR | ADD'L FEE | <u></u> |
| | | (Column 1) CLAIMS | 1 | (Column 2) HIGHEST | (Column 3) | 1 1 | | | | [| |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| Ĭ | Total (37 CFR 1.16(c)) | • • | Minus | ** | = | | x s= | | OR | x \$= | |
| EN | Independent (37 CFR 1.16(b)) | * | Minus | *** | = | | x s = | | OR | x \$ _ = | |
| ¥ | FIRST PRESENT | ATION OF MULTIPLE | E DEPENDE | NT CLAIM (37 CF | R 1.16(d)) | | +s = | | OR | +s = | - |
| | · · · · · · · · · · · · · · · · · · · | | | · · · | | i i | TOTAL | | | TOTAL ADD'L FEE | |
| | | | | | | | ADD'L FEE | | OR | ADDEFEE | |
| ,.1 | | (Column 1) CLAIMS | П | (Column 2) HIGHEST | (Column 3) |] [| | | | | |
| NT C | | REMAINING AFTER AMENDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| NE. | Total (37 CFR 1.15(c)) | • | Minus | •• | = | | x s= | | OR | × \$= | |
| AMENDMENT | independent (37 CFR 1.16(b)) | • | Minus | *** | = | | x s= | | OR | x s= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | | | +s = | | OR | + s = | |
| - | | | | | , | ı | TOTAL | | | TOTAL | |
| | ADD'L FEE OR ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". | | | | | | | | | | |

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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David M. Solak 4805 Maple Hill Drive Seven Hills, Ohio 44131-5916 March 1, 2004

To the USPTO,

I respectfully assert small entity status and would like to have the benefits of such a title including the fee payment category and all the privileges that come with the title.

Sincerely,

David M. Solak